

(Classification)

EMERGENCY ACTION STATEMENT	PREPARING AGENCY/OFFICE	DATE								
1. ACTION RECOMMENDED <i>(Brief description and reasons therefor)</i>										
2. TIME ACTION SHOULD BE TAKEN <i>(Check as appropriate)</i> Deployment Readiness Condition (DRC) <input type="checkbox"/> Civil-Military Cooperation <input type="checkbox"/> DEFCON <table border="1" data-bbox="1218 924 1526 955"><tr><td>1</td><td><input type="checkbox"/></td><td>2</td><td><input type="checkbox"/></td><td>3</td><td><input type="checkbox"/></td><td>4</td><td><input type="checkbox"/></td></tr></table> OTHER <input type="checkbox"/> _____			1	<input type="checkbox"/>	2	<input type="checkbox"/>	3	<input type="checkbox"/>	4	<input type="checkbox"/>
1	<input type="checkbox"/>	2	<input type="checkbox"/>	3	<input type="checkbox"/>	4	<input type="checkbox"/>			
3. AGENCY RESPONSIBLE FOR INIATING ACTION	4. AGENCY RESPONSIBLE FOR FORWARDING ACTION									
5. AGENCY OR PERSON RESPONSIBLE FOR APPROVING ACTION	6. AGENCY RESPONSIBLE FOR IMPLEMENTING ACTION									
7. AGENCIES WITH WHICH ACTION HAS BEEN COORDINATED										
8. AUTHORITY EXISTING OR REQUIRED FOR ACTION										
9. REMAINING ACTION TO BE TAKEN										
10. INCLOSURE(S)										

ATTACH, IN FINAL FORM IF POSSIBLE, COPY OF PROPOSED ACTION

DA FORM 5072, APR 1982

REPLACES DD FORM 855, NOV 56,
WHICH IS OBSOLETE.

APD LC v1.00

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